

**application test / calibration**

applicant:

contact:

address:

postcode:

city:

country:

fax:

phone:

e-mail:

tax ID number:

**Indications to measuring instrument:**

manufacturer:

type of measuring instrument:

type identification:

serial no°:

scope:

calibration

test

retest

Please indicate the calibration mark and the PTB reference number in the case of retest:

calibration mark:

PTB reference number.:

(e.g. PTB-2.3-123456789)

The applicant herewith declares that he/she knows and accepts PTB's general terms and conditions of business.

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legally binding signature

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place, date